

# OSAH FORM 1

This form is available online at <http://www.osah.ga.gov> or by telephone request at (404) 657-2800.

OSAH USE ONLY DOCKET NUMBER:	AGENCY CODE GGTACFC	CASE TYPE	DOCKET NUMBER	COUNTY	JUDGE
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## GEORGIA GOVERNMENT TRANSPARENCY AND CAMPAIGN FINANCE COMMISSION

### Case Type:

- ☐ RV (Registration Violation) ☐ CAN (Candidate) ☐ LOBB (Lobbyist) ☐ VEN (Vendor) ☐ Other  
☐ FDV (Finance Disclosure Violation) ☐ NCAN (Non-Candidate/Independent Committee)

### Relief Sought:

- ☐ Cease and desist order  
☐ Order Requiring Defendant to make public complete statements, in corrected form  
☐ Civil penalty not to exceed \$1,000.00 for first violation  
☐ Civil penalty not to exceed \$10,000.00 for a second occurrence of a violation of the same provision  
☐ Civil penalty not to exceed \$25,000.00 for each third or subsequent occurrence of a violation of the same provision  
☐ Denial, suspension or revocation of the registration of a lobbyist  
☐ Award attorneys' fees  
☐ Other

DATE COMPLAINT FILED WITH COMMISSION:

COUNTY OF ALLEGED VIOLATOR:

### CONTACT PERSON IN COMMISSION:

NAME:	TEL NO:	FAX NO:
CURRENT ADDRESS INCLUDING ZIP CODE ON HEARING REQUEST	POSITION	EMAIL: PAGER:

### PLAINTIFF:

NAME:	TEL NO:	FAX NO:
CURRENT ADDRESS INCLUDING ZIP CODE ON HEARING REQUEST	POSITION	EMAIL: PAGER:

### PLAINTIFF'S ATTORNEY:

ATTORNEY NAME:	TEL NO:	FAX NO:
CURRENT ADDRESS INCLUDING ZIP CODE ON HEARING REQUEST	GEORGIA BAR NO:	EMAIL: PAGER:

### DEFENDANT:

NAME:	TEL NO:	FAX NO:
CURRENT ADDRESS INCLUDING ZIP CODE ON HEARING REQUEST		EMAIL: PAGER:

### DEFENDANT'S ATTORNEY:

NAME:	TEL NO:	FAX NO:
CURRENT ADDRESS INCLUDING ZIP CODE ON HEARING REQUEST	GEORGIA BAR NO:	EMAIL: PAGER:

\* The verified Complaint initiating the action and proof of service on Defendant must be attached to this Form and mailed to:

Clerk of Court  
Georgia Office of State Administrative Hearings  
230 Peachtree Street, NW, Suite 850  
Atlanta, GA 30303